

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>H-S</i>	<i>866</i>	<i>3/1</i>
FORMALITY REVIEW	<i>H-S</i>	<i>866</i>	<i>03-V-01</i>
RESPONSE FORMALITY REVIEW	<i>R.B</i>	<i>1078</i>	<i>05/16/01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date	Claim	Date	Claim	Date
Final	Original	Final	Original	Final	Original
1	1	51	51	91	91
2	2	52	52	92	92
3	3	53	53	93	93
4	4	54	54	94	94
5	5	55	55	95	95
6	6	56	56	96	96
7	7	57	57	97	97
8	8	58	58	98	98
9	9	59	59	99	99
10	10	60	60	100	100
11	11	61	61	101	101
12	12	62	62	102	102
13	13	63	63	103	103
14	14	64	64	104	104
15	15	65	65	105	105
16	16	66	66	106	106
17	17	67	67	107	107
18	18	68	68	108	108
19	19	69	69	109	109
20	20	70	70	110	110
21	21	71	71	111	111
22	22	72	72	112	112
23	23	73	73	113	113
24	24	74	74	114	114
25	25	75	75	115	115
26	26	76	76	116	116
27	27	77	77	117	117
28	28	78	78	118	118
29	29	79	79	119	119
30	30	80	80	120	120
31	31	81	81	121	121
32	32	82	82	122	122
33	33	83	83	123	123
34	34	84	84	124	124
35	35	85	85	125	125
36	36	86	86	126	126
37	37	87	87	127	127
38	38	88	88	128	128
39	39	89	89	129	129
40	40	90	90	130	130
41	41	91	91	131	131
42	42	92	92	132	132
43	43	93	93	133	133
44	44	94	94	134	134
45	45	95	95	135	135
46	46	96	96	136	136
47	47	97	97	137	137
48	48	98	98	138	138
49	49	99	99	139	139
50	50	100	100	140	140
				141	141
				142	142
				143	143
				144	144
				145	145
				146	146
				147	147
				148	148
				149	149
				150	150

If more than 150 claims or 10 actions
staple additional sheet her

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L.L.
03/19/01

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